

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010063-6

PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
Bu. Vou. No. _____

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No. _____

To Ramo-Wooldridge Corporation
(Payee)

8820 Ballanca Avenue Los Angeles 45, California
(Address) (City) (State)

Page 1 of 1

PAID BY

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		INVOICE NUMBERS					
		1067				\$3,926	67✓
		1068				8,506	99✓
		1069				37,179	45✓
		1070				40,659	28✓

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____
Total \$ 90,272 39✓

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences _____

Date _____ *Payee _____
(This certificate not required when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for _____

(Signature or initials)

Per _____ Title _____

Contract No. A-101 Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper

† Approved for \$ _____

By _____
SIGN ORIGINAL ONLY

Title _____ Date _____

(Approving Officer)

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

STATINTL

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

STATINTL

STATINTL

Paid by { Check No. _____ dated _____, 19____, for \$ _____ } on Treasurer of the United States in
Cash, \$ _____, on _____, 19____. Payee _____ favor of payee named above.
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the name of the company, must be written in the space provided. For example, "John Doe Company, per _____". If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Title _____

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PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. Vou. No.

Bu. Vou. No.

Page 1 of 1

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No. _____

To **Rams-Woolbridge Corporation**
(Payee)

8820 Ballance Avenue Los Angeles 45, California
(Address) (City) (State)

PAID BY

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Discount Terms INVOICE NUMBERS					
		1067				43,926	67
		1068				8,506	99
		1069				37,179	45
		1070				40,639	28
Use continuation sheet(s) if necessary							
PAYMENT:							
Complete <input type="checkbox"/>							
Partial <input type="checkbox"/>							
Final <input type="checkbox"/>							

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total **\$ 90,272 39**

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

Date _____ *Payee _____
(This certificate not required when a like certificate is made by payee on attached bill or bills)

Per _____ Title _____

Contract No. **A-101** Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

(Authorized Certifying Officer)

By _____

SIGN
ORIGINAL
ONLY

Title **(Contracting Officer)**

Title **(Approving Officer)**

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

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{ Cash, \$ _____, on _____, 19____ } favor of payee named above.
Payee _____
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporation, as well as the name of the person who signed the voucher, must be written in the space provided. For example: "John Doe Company, per _____ Secretary" or "Treasurer," as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Title _____